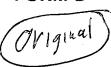
FORM D



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL								
OMB Number:	3235-0076							
Expires:	May 31, 2005							
Estimated average burden								
hours per respon	nse 16.00							

SEC USE ONLY								
Prefix	Serial							
DATE RECEIVED								
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Name of Offering (check if this is an amendment and name has changed, and indicate change.) AAAS 5 Megan worlds Wand howev . The C	0=0
MAS 5 MegawalTS Wind Power Tyc. Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6)	T ULOE SEP
Type of Filing: New Filing Amendment	
	RECEIVED
A. BASIC IDENTIFICATION DATA	FIN
1. Enter the information requested about the issuer	SEP 1 7 2002
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	
MASS Megawatts Wind Power, Fin c Address of Executive Offices (Number and Street, City, State, Zip Code)	180
	Telephone Number (Including Area Code)
11 Maple Avenue Shrewsbury, MA 01545	(508/ 75V-5432
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices)	
Brief Description of Business	
Wind turbine vesearch and manufacturing	
Type of Business Organization	
	lease specify): 02058409
business trust limited partnership, to be formed	
Month Year	
Actual or Estimated Date of Incorporation or Organization:	
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction)	
GENERAL INSTRUCTIONS	
Federal:	

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to tile the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA										
2. Enter the information requested for the following:										
• Each promoter of the issuer, if the issuer has been organized within the past five years;										
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issue										
• Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and										
Each general and managing partner of partnership issuers.										
Check Box(es) that Apply: Promoter Deneficial Owner Denef										
Ricker Jonathan Managing Partner										
Full Name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State, Zip Code) Mayle Avehue 5hvewshuvy, MA 01545										
Business or Residence Address (Number and Street, City, State, Zip Code)										
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner										
Full Name (Last name first, if individual)										
11 Marle Arouse Showall MA Diche										
Business of Residence Address (Number and Street, City, State, Zip Code) Mayle Avenue Shvewghovy, MA 01545 Business of Residence Address (Number and Street, City, State, Zip Code)										
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner										
Vizzo Indi										
Full Name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State, Zip Code) MA 01545										
Business or Residence Address (Number and Street, City, State, Zip Code)										
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner										
Full Name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State, Zip Code)										
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or										
Managing Partner										
Full Name (Last name first, if individual)										
Tun Name (Last name 16st, it individual)										
During Bridge Address Observed Care Charles To Cold										
Business or Residence Address (Number and Street, City, State, Zip Code)										
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner										
Full Name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State, Zip Code)										
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or										
Managing Partner										
Full Name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State, Zip Code)										

					B. I	NFORMAT	ION ABOU	I OFFERI	NG .				
1.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?										Yes ∕⊠	No	
	1140 1110		2, 01 0000			Appendix							السا
2.	What is	the minim	um investr					_				\$2	25
	What is the minimum investment that will be accepted from any individual?											Yes	No
3.	Does the offering permit joint ownership of a single unit?										M		
4.	commis If a pers or states	sion or sim on to be lis , list the na	ion request ilar remune ited is an ass ame of the b , you may s	ration for s sociated po roker or de	solicitation erson or ago caler. If mo	of purchase ent of a brok ore than five	ers in conne cer or deale e (5) persor	ection with r registered is to be list	sales of sec I with the S ed are asso	curities in t SEC and/or	he offering with a state	:	
			first, if ind	ividual)									
Bus	hone	Desidence	Address (N	Tumber and	1 Street C	ity State 7	'in Code)						
Dus	5111035 01	Residence	Audiess (in	dilloci and	i Sireei, C	ity, State, 2	ip Code)						
Nar	ne of Ass	ociated Bi	oker or De	aler					* ****				
Sta	tes in Wh	ich Persor	Listed Has	s Solicited	or Intends	to Solicit	Purchasers				·		
	(Check	"All States	s" or check	individual	States)		.,	*****************	***************************************			☐ A1	ll States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	(<u>(1)</u>
		IN	1A	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Ful	1 Name (1	ast name	first, if ind	ividual)									
Bus	siness or	Residence	Address (1	Number an	d Street, C	City, State,	Zip Code)						
Nai	ne of Ass	ociated Br	oker or De	aler	······································								
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Sta			Listed Has " or check										U C4-4
	(Cneck	An States	s or eneck	individuai	States)			*****************	***************************************	****************		∐ Ai	I States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
		IN	ĪĀ	KS	KY	LA	ME	MD	MA	MI	MN	MS	МО
	MT]	NE	NV	NH	NJ TV	NM	NY	NC NC	ND	OH)	OK.	OR	PA
	RI	SC	SD	[TN]	TX	[UT]	VT	VA	WA	[WV]	WI	WY	PR
rui	i Name (i	Jast name	first, if ind	ividuai)									
Bus	iness or	Residence	Address (1	Number an	d Street, C	City, State,	Zip Code)						
Nat	ne of Ass	ociated Bi	oker or De	aler	· · · · · · · · · · · · · · · · · · ·								
Sta	tes in Wh	ich Person	Listed Has	s Solicited	or Intends	to Solicit	Purchasers						
			or check						•••••		••••••	☐ Al	l States
	ΛL	ΛK	ΛZ	ΛR	CA	CO	CT	DE	DC	FL	GΛ	HI	[II]
		IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA
	RI	SC	SD	TN	TX	UT	∇T	VAI	WA	WV	WI	WY	PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	already exchanged. Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	2	•
	Equity		9 6 67 242
	Common Preferred	o Divo	- 3-14-25
	Convertible Securities (including warrants)	S	\$
	Partnership Interests		
	Other (Specify)		
	Total		
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors	6_	\$ 20,243
	Non-accredited Investors		\$ 37,000
	Total (for filings under Rule 504 only)	****	\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	*****	\$
	Regulation A		\$
	Rule 504		\$
	Total	· · · · · · · · · · · · · · · · · · ·	\$
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees] \$
	Accounting Fees		\$
	Engineering Fees] \$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)		§
	Total	Г	1 \$

	b. Enter the difference between the aggregate offering price given in response to Part C — Question 1 and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted gross"	3	6
5.	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.	, I	3
		Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees	□\$ <u>-0-</u>	□\$ <u>~~~</u>
	Purchase of real estate	□\$ <u>-0</u> -	□\$ <u>~</u> 0 ~
	Purchase, rental or leasing and installation of machinery and equipment		\$
	Construction or leasing of plant buildings and facilities	□ \$	\$ 65,000
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)		
	Repayment of indebtedness	□ \$	□\$ <u>-0</u> -
	Working capital	S	□\$ <u>-0-</u>
	Other (specify):		□\$ <u>~</u> Ø~
	Column Totals		□s 65,000
	Total Payments Listed (column totals added)	□ \$6	5,000
	D. FEDERAL SIGNATURE		4
sig	e issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice mature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commistender furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of	ssion, upon writte	
		Date /	./-
1	MASS Megawatts Wind Paner, In Staffen Julies I Title of Signer (Print or Type)	9/1	6/2002
	bruathan Reter Print or Type)		-

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

			GN			

1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification	Yes	No
,	provisions of such rule?	П	Œ
			نمن
	See Appendix, Column 5, for state response.		
	See Appendix, Column 3, 101 state response.		

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature //	Date /
MASS Meyawatts Wind Pawer Inc	Constan Keep	12 9/16/2002
Name (Print or Type)	Title (Print or Type)	7 '
Jonathan Rickel	President	·

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

1.5				AP	PENDIX				
1	Intend to non-a investor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		4 Type of investor and amount purchased in State (Part C-Item 2)			5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK					·				
AZ									
AR									
CA									
СО		,							
CT									
DE									
DC									
FL									
GA	:								
ні									
ID									
IL									
IN									
IA									
KS									
KY									
LA									
ME							-		
MD									
MA	X		Common Stal	τ /	20243	1	37,000		
MI							7		
MN									
MS									

APPENDIX 4 2 3 Disqualification under State ULOE Type of security (if yes, attach Intend to sell and aggregate offering price Type of investor and explanation of to non-accredited amount purchased in State investors in State offered in state waiver granted) (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) (Part B-Item 1) Number of Number of Accredited Non-Accredited No State Yes No **Investors** Amount **Investors** Amount Yes MO MT NE NVNH NJ NMNY NC ND

OH

OK

OR PA

RI

SC

SD

TN

TX

UT VT

VA

WA WV

WI

				APP	ENDIX	100				
1	Intend to sell to non-accredited investors in State (Part B-ltem 1) Type of security and aggregate offering price offered in state (Part C-ltem 1)			Type of investor and amount purchased in State (Part C-Item 2)					5 Disqualification under State ULOE (if.yes, attach explanation of waiver granted) (Part E-Item I)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
PR				1						